Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	Julie First name B.	First name
	license or passport). Bring your picture	Middle name Alonso	Middle name
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8707	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)			
		EINs	EINs			
5.	Where you live	63 Evans Ave.	If Debtor 2 lives at a different address:			
		Youngstown, OH 44515 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Mahoning County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Deb	otor 1 Julie B. Alonso					Case	number (if known)		
	t 2: Tell the Court About								
7.	The chapter of the Bankruptcy Code you are			rief description of each, see a go to the top of page 1 and c			.C. § 342(b) for Individ	uals Filing for Bankruptcy	
	choosing to file under	☐ Chap							
		☐ Chap	ter 11						
		☐ Chap	ter 12						
		■ Chap	ter 13						
8.	How you will pay the fee	abo ord	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or mone order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.						
				the fee in installments. If ye in Installments (Official Form		e this option, sign	n and attach the Applic	ation for Individuals to Pay	
		☐ I re	equest that is not requalies to you	t my fee be waived (You ma	y request may do so able to pay	only if your inco the fee in instal	ome is less than 150% Iments). If you choose	of the official poverty line that this option, you must fill out	
			<i>-</i>	Trave de Grapier i i i i i		Wed (Official Fol	m roob) and me it will	r your pennorn.	
9.	Have you filed for bankruptcy within the last 8 years?	□ No. ■ Yes.							
			District	Northern District of	\	5/24/11	Cana awahan	11-41560	
			District	Ohio	When When	3/24/11	Case number Case number	11-41300	
			District District		When		Case number		
			District		_ *********		Case namber		
10.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor				Relationship to	you	
			District		_ When		Case number, if	known	
			Debtor				Relationship to	you	
			District		_ When		Case number, if	known	
11.	Do you rent your	■ No.	Go to li	ne 12.					
	residence?	☐ Yes.	Has yo	ur landlord obtained an evicti	on judgm	ent against you a	and do you want to stay	in your residence?	

No. Go to line 12.

bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

Deb	otor 1 Julie B. Alonso				Case number (if known)		
Par	t 3: Report About Any Bu	sinossos	You Owr	n as a Sole Proprie	tor		
	Are you a sole proprietor of any full- or part-time business?	■ No.		Part 4.	<u>~</u>		
	business:	☐ Yes.	Name	and location of bus	iness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	Number, Street, City, State & ZIP Code			
	it to this petition.		Chec	k the appropriate bo	x to describe your business:		
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))		
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))		
				None of the above	e		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation in 11 U.S	you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set eadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, serations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the 11 U.S.C. 1116(1)(B).				
	For a definition of small	No.	rann	not filing under Chap	NGC 111.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			s the property?			
					Number, Street, City, State & Zip Code		

Debtor 1 Julie B. Alonso

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

Deb	tor 1 Julie B. Alonso			Case number (if	known)		
Part	6: Answer These Questi	ons for Re	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consu individual primarily for a personal	mer debts? Consumer debts are defined, family, or household purpose."	in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.		ess debts? Business debts are debts that or through the operation of the busines			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe the	nat are not consumer debts or business d	ebts		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. G	o to line 18.			
	Do you estimate that after any exempt property is excluded and	☐ Yes.		ou estimate that after any exempt property le to distribute to unsecured creditors?	is excluded and administrative expenses		
	administrative expenses are paid that funds will be available for distribution to unsecured		□ No				
			☐ Yes				
	creditors?						
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20	How much do you	П ¢о ф		П ф4 000 004 . Ф40 million	П фгоо ооо оод - фд h::::		
20.	estimate your liabilities to be?	□ \$100,0	01 - \$100,000 01 - \$500,000 001 - \$5 million	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
Part	7: Sign Below						
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
		Julie B.	B. Alonso Alonso of Debtor 1	Signature of Debtor 2			
		Executed	on July 20, 2017 MM / DD / YYYY	Executed on MM / D	D/YYYY		

Debtor 1	Julie B. Alonso	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Diane S	Sekerak Stevens	Date	July 20, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Diane Sek	erak Stevens		
Printed name			
Diane Sek	erak Stevens		
Firm name			
Attorney a	t Law		
150 E. Mar	ket St., Suite 300		
Warren, O	H 44481		
Number, Street,	City, State & ZIP Code		
Contact phone	330-391-7484	Email address	DStevens@dianestevenslaw.com
0064775			
Bar number & S	tato		

		nation to identify your	case:			
Debt	or 1	Julie B. Alonso First Name	Middle Name	Last Name		
Debt	or 2 se if, filing)	First Name	Middle Name	Last Name		
		nkruptcy Court for the:	NORTHERN DISTRIC			
		mapley Court for the.				
(if know	number wn)				☐ Check	if this is an
					amend	ded filing
		rm 106Sum				
				and Certain Statistical Information le are filing together, both are equally responsib		12/15
inforn	nation. Fill c	out all of your schedul	es first; then complete	the information on this form. If you are filing am		
		•	new Summary and che	eck the box at the top of this page.		
Part	1: Summa	arize Your Assets				
					Your as	ssets f what you own
1.	Schedule A	/B: Property (Official Fo	orm 106A/B)			,
	1a. Copy line	e 55, Total real estate, f	rom Schedule A/B		\$	80,350.00
	1b. Copy line	e 62, Total personal pro	perty, from Schedule A/E	3	\$	3,355.00
	1c. Copy line	e 63, Total of all propert	y on Schedule A/B		\$	83,705.00
Part :	2: Summa	arize Your Liabilities				
	<u> </u>				Your lia	abilities
					Amount	you owe
			laims Secured by Proper	rty (Official Form 106D) at the bottom of the last page of Part 1 of <i>Schedule L</i>	D \$	77,000.00
		•	Unsecured Claims (Office			·
				ims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the	e total claims from Part	2 (nonpriority unsecured	I claims) from line 6j of Schedule E/F	\$	16,603.54
				Your total liabili	ties \$	93,603.54
Part :	2: Summ	arize Your Income and	l Evnancos			
	-					
		Your Income (Official Foombined monthly incom		ıle I	\$	1,846.75
		Your Expenses (Official	,		¢.	1,632.00
		, ,			\$	1,032.00
Part 4	4: Answe	r These Questions for	Administrative and Sta	atistical Records		
	-		er Chapters 7, 11, or 13	3? Check this box and submit this form to the court with	n vour other sch	edules
	_	a mana maming to roport	2	and	. ,	
7.	Yes What kind or	of debt do you have?				
		•	ouman debte o	and the same though the same the same that t		family
				er debts are those "incurred by an individual primarily 3-9g for statistical purposes. 28 U.S.C. § 159.	ior a personal,	ramily, or

the court with your other schedules.

page 1 of 2

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Official Form 106Sum

Best Case Bankruptcy

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$______2,266.13

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill is	n this informa	tion to identify	your case and th	is filing	7.				
Debt		Julie B. Alo		iis iiiiii	j -				
		First Name		Name	Last Name				
Debte (Spous	or 2 se, if filing)	First Name	Middle	Name	Last Name				
Unite	ed States Bank	ruptcy Court for	the: NORTHER	N DIST	RICT OF OHIO				
Case	number							☐ Ch	neck if this is an
								_	nended filing
		<u>n 106A/E</u>	_						
<u>Sc</u>	<u>hedule</u>	A/B: P	roperty						12/15
think i	t fits best. Be a nation. If more s er every question	as complete and space is needed, on.	accurate as possibl attach a separate sl	e. If two neet to t	only once. If an asset fits in more than or married people are filing together, both an his form. On the top of any additional page Estate You Own or Have an Interest In	e equally resp	onsible for su	plying o	correct
_	-		junable interest in a	my resid	ence, building, land, or similar property?				
_	No. Go to Part 2 Yes. Where is tl								
1.1	63 Evans A	venue		What	is the property? Check all that apply	5			
_		vailable, or other des	scription		Single-family home Duplex or multi-unit building Condominium or cooperative	the amount	luct secured cla t of any secured Who Have Clain	l claims o	on Schedule D:
	Youngstow	n OH	44515-0000		Manufactured or mobile home	Current va			nt value of the
	City	State	ZIP Code		Investment property	\$8	30,350.00		\$80,350.00
					Timeshare Other				ership interest the entireties, or
				Who	has an interest in the property? Check one	a life estat	e), if known.	,, .	
	Mahoning				Debtor 1 only Debtor 2 only	Fee Sim	ріе		
_	County					011	***************************************		
							c if this is com structions)	munity p	roperty
					r information you wish to add about this it erty identification number:	em, such as lo	cal		
				р.ор	orly radianidation number.				
					your entries from Part 1, including an			;	\$80,350.00
Part 2	2: Describe Yo	our Vehicles							
					ny vehicles, whether they are registe Schedule G: Executory Contracts and U			hicles y	ou own that
3. Ca	rs, vans, truc	ks, tractors, sp	oort utility vehicle	s, moto	orcycles				
	No								
	Yes								

Debtor 1	Julie B. Alonso Case number (if known)
	eraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	es
■ No		
☐ Yes		
	ne dollar value of the portion you own for all of your entries from Part 2, including any entries fo you have attached for Part 2. Write that number here	en nn
Part 3: D	escribe Your Personal and Household Items	
Do you o	wn or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Exam</i> µ □ No	hold goods and furnishings bles: Major appliances, furniture, linens, china, kitchenware Describe	
- 165	. Describe	
	living room furniture, bedroom furniture, table/chairs, stove, refrigerator, dishwasher, microwave, washer/dryer. No single item valued over \$1,000.00.	\$2,500.00
□ No	 conics coles: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; including cell phones, cameras, media players, games Describe 	music collections; electronic devices
		\$500.00
	Television, computer	
	cibles of value oles: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; star other collections, memorabilia, collectibles	mp, coin, or baseball card collections;
_	. Describe	
	nent for sports and hobbies oles: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; musical instruments	canoes and kayaks; carpentry tools;
■ No □ Yes	. Describe	
10. Firea i <i>Exan</i> ■ No	rms apples: Pistols, rifles, shotguns, ammunition, and related equipment	
☐ Yes	. Describe	
11. Cloth <i>Exan</i> □ No	es nples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
Yes	. Describe	
	used clothing	\$50.00
■ No	ry nples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, Describe	, gems, gold, silver
∟ Yes	. Describe	

De	btor 1 Julie B. Alons	so	Case number (if	known)
13.	Non-farm animals	irde bareae		
	Examples: Dogs, cats, b ■ No	niras, norses		
	Yes. Describe			
14.	_ '	I household items you did	not already list, including any health aids you did not	ilist
	■ No□ Yes. Give specific info	rmation		
	L 103. Olve specific into	maton		
15		-	Part 3, including any entries for pages you have attach	\$3,050.00
Pa	rt 4: Describe Your Financ	ial Assets		
Do	you own or have any le	gal or equitable interest ir	n any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	□ No	ave in your wallet, in your h	ome, in a safe deposit box, and on hand when you file you	ur petition
	— 163			
			Cash on ha	and \$30.00
	□ No ■ Yes	,	s with the same institution, list each. Institution name:	
		17.1. Checking	Chase Bank	\$275.00
18.	_		okerage firms, money market accounts	
	■ No □ Yes	Institution or issuer	name:	
19.	joint venture	ock and interests in incorp	porated and unincorporated businesses, including an	interest in an LLC, partnership, and
	■ No No Give specific info	ormation about them		
	L 103. Olve specific fillo	Name of entity:	% of ownership):
20.	Negotiable instruments i	include personal checks, ca	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
	■ No			
	☐ Yes. Give specific infor	rmation about them Issuer name:		
21.	'		403(b), thrift savings accounts, or other pension or profit-s	
	□ No	, , , , , , , , , , , , , , , , , , , ,	403(b), tillit savings accounts, or other pension or profit-s	sharing plans
	☑ Yes. List each account		Institution name:	sharing plans

De	btor 1	Julie B. A	lonso		Case number (if known)	
	Your s	hare of all unu			ontinue service or use from a company electric, gas, water), telecommunications compa	nies, or others
	_			Institution	n name or individual:	
	Annuiti ■ No	ies (A contrac	et for a periodic payme	nt of money to you, either	for life or for a number of years)	
	□ Yes		Issuer name and des	cription.		
			ation IRA, in an accord 1), 529A(b), and 529(b)		program, or under a qualified state tuition pro	ogram.
	□ Yes		Institution name and	description. Separately file	e the records of any interests.11 U.S.C. § 521(c)	:
	Trusts, ■ No	, equitable or	future interests in pr	operty (other than anyth	ning listed in line 1), and rights or powers ex	ercisable for your benefit
	☐ Yes.	Give specific	information about ther	m		
	_Examp			ecrets, and other intelledes, proceeds from royalties	ctual property s and licensing agreements	
	■ No □ Yes.	Give specific	information about ther	m		
			s, and other general permits, exclusive licer		tion holdings, liquor licenses, professional licens	ses
		Give specific	information about ther	m		
Mo	ney or	property owe	ed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	funds owed to	o you			
	■ No □ Yes.	Give specific	information about them	n, including whether you a	lready filed the returns and the tax years	
	Examp ■ No		or lump sum alimony,	spousal support, child suլ	pport, maintenance, divorce settlement, property	y settlement
	— 103.	Oive specific	inionnation			
	Examp _	oles: Unpaid w	neone owes you vages, disability insurar unpaid loans you mad		enefits, sick pay, vacation pay, workers' compe	ensation, Social Security
	■ No □ Yes.	Give specific	information			
		ets in insuran oles: Health, d		ce; health savings accour	nt (HSA); credit, homeowner's, or renter's insura	nce
	Yes.	Name the ins	urance company of eac Company nan	ch policy and list its value ne:	Beneficiary:	Surrender or refund
			-			value:
			AFLAC - En cash value	nployer sponsored. N	No	\$0.00

De	btor 1	Julie B. Alonso	Case nur	mber (if known)	
I	If you a someon	erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance poine has died. Give specific information	icy, or are currently	entitled to rece	eive property because
•	— 100.	ONE SPECIFIC INFORMATION.			
ı	<i>Examp</i> ■ No	against third parties, whether or not you have filed a lawsuit or made les: Accidents, employment disputes, insurance claims, or rights to sue Describe each claim	a demand for payn	nent	
	□ res.	Describe each daim			
-	No	ontingent and unliquidated claims of every nature, including countered Describe each claim	laims of the debto	r and rights to	set off claims
		ancial assets you did not already list			
_	■ No □ Yes.	Give specific information		ı	
36.		ne dollar value of all of your entries from Part 4, including any entries rt 4. Write that number here		attached	\$305.00
Par	t 5: Des	scribe Any Business-Related Property You Own or Have an Interest In. List any	eal estate in Part 1.		
_		wn or have any legal or equitable interest in any business-related property?			
	No. Go	to Part 6.			
	Yes. G	o to line 38.			
Par		scribe Any Farm- and Commercial Fishing-Related Property You Own or Have an own or have an interest in farmland, list it in Part 1.	Interest In.		
46	Do vou	own or have any legal or equitable interest in any farm- or commercia	l fishing-related pr	operty?	
٦٥.		Go to Part 7.	g . c.a.ca p.	oporty:	
	_	Go to line 47.			
	□ 165.	Go to line 47.			
Par	t 7:	Describe All Property You Own or Have an Interest in That You Did Not List Al	ove		
_	Examp	have other property of any kind you did not already list? les: Season tickets, country club membership			
	No				
l	☐ Yes. (Give specific information			
54.	Add tl	ne dollar value of all of your entries from Part 7. Write that number her	÷		\$0.00
Par	t 8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$80,350.00
56.			0.00		
57.	Part 3	: Total personal and household items, line 15 \$3,05	0.00		
58.			5.00		
59.			0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	0.00		
61.	Part 7	: Total other property not listed, line 54 +	0.00		
62.	Total	personal property. Add lines 56 through 61 \$3,35	5.00 Copy pers	onal property t	otal \$3,355.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$83,705.00

Last Name	
Last Name	
Last Name	
OF OHIO	
	☐ Check if this is an amended filing
(Last Name OF OHIO

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming?	Check one only,	even if your spo	ouse is filing with you.

■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own	Aiii	ount of the exemption you claim	opeome laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
63 Evans Avenue Youngstown, OH 44515 Mahoning County	\$80,350.00		\$17,350.00	Ohio Rev. Code Ann. § 2329.66(A)(1)
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2020:00(-1)(-1)
living room furniture, bedroom furniture, table/chairs, stove,	\$2,500.00		\$2,500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
refrigerator, dishwasher, microwave, washer/dryer. No single item valued over \$1,000.00. Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(4)(a)
Television, computer Line from Schedule A/B: 7.1	\$500.00		\$500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Line Holli Golledale PAB. 111			100% of fair market value, up to any applicable statutory limit	2020.00(A)(4)(a)
used clothing Line from Schedule A/B: 11.1	\$50.00		\$50.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Elle Holli Genedale PAB. 11.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(4)(a)
Cash on hand Line from Schedule A/B: 16.1	\$30.00		\$30.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
Line from Goriedaie AVD. 1911			100% of fair market value, up to any applicable statutory limit	2020.00(17)(0)

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Debtor	Julie B. Alonso	Case number (if known)					
	ef description of the property and line on hedule A/B that lists this property	Current value of the portion you own	Am	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	necking: Chase Bank	\$275.00		\$275.00	Ohio Rev. Code Ann. § 2329.66(A)(3)		
Σ	o nom osnodalo /v2.			100% of fair market value, up to any applicable statutory limit	2020.00(1.1)(0)		
	PERS ne from Schedule A/B: 21.1	Unknown		\$0.00	Ohio Rev. Code Ann. §§ 2329.66(A)(10)(a), 521.09,		
LIII	le nom <i>Schedule A/D.</i> 2111			100% of fair market value, up to any applicable statutory limit	145.56, 145.75, 145.13, 742.47, 3307.71		
	FLAC - Employer sponsored. No sh value	\$0.00		\$0.00	Ohio Rev. Code Ann. §§ 2329.66(A)(6)(c), 3917.05		
	e from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	2023.00(A)(0)(0), 3311.03		
	e you claiming a homestead exemption ubject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cover No Yes	3 years after that for ca	ises fi				

Fill in this information to identify you	ır case:				
Debtor 1 Julie B. Alonso First Name	Middle Name Last	t Name			
Debtor 2 (Spouse if, filing) First Name	Middle Name Last	t Name			
United States Bankruptcy Court for the	NORTHERN DISTRICT OF OHIO				
Ocean server have					
Case number				☐ Check	if this is an
					led filing
Official Form 106D					
	Who Hove Claims So	ourod	by Proporty		4045
Schedule D: Creditors	Who Have Claims Sec	<u>sur ea</u>	by Propert	<u>y </u>	12/15
	If two married people are filing together, boot, number the entries, and attach it to this				
Do any creditors have claims secured by	y your property?				
☐ No. Check this box and submit t	his form to the court with your other sche	dules. You	have nothing else t	o report on this form.	
Yes. Fill in all of the information	below.				
Part 1: List All Secured Claims					
	more than one secured claim, list the creditor s	separately	Column A	Column B	Column C
for each claim. If more than one creditor has much as possible, list the claims in alphabeti	s a particular claim, list the other creditors in Part 2. As		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1 Ditech Financial LLC	Describe the property that secures the cl	aim:	value of collateral. \$63,000.00	claim \$80,350.00	If any \$0.00
Creditor's Name	63 Evans Avenue Youngstown,		400,000.00		
	44515 Mahoning County				
3000 Bayport Drive Suite 880	As of the date you file, the claim is: Check	all that			
Tampa, FL 33607	apply. Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as mortga	age or secur	red		
Debtor 2 only	car loan)	-l- (:)			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanice ☐ Judgment lien from a lawsuit	rs lien)			
☐ Check if this claim relates to a	☐ Other (including a right to offset)				
community debt	,				
Date debt was incurred 5/21/2003	Last 4 digits of account number	9814			
2.2 GM Financial Leasing	Describe the property that secures the cl	aim:	\$14,000.00	\$14,000.00	\$0.00
Creditor's Name	2015 GMC Terrain		Ψ14,000.00	Ψ14,000.00	Ψ0.00
DO D 404445	As of the date you file, the claim is: Check	all that			
PO Box 181145 Arlington, TX 76096-1145	apply.				
Number, Street, City, State & Zip Code	☐ Contingent☐ Unliquidated				
riambor, octobi, only, octate a Exp octab	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as mortga	age or secur	red		
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic	s's lien)			
☐ At least one of the debtors and another☐ Check if this claim relates to a	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)				
community debt	— Other (including a right to offset)				
Date debt was incurred 11/2015	Last 4 digits of account number	2268			

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

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Debtor 1 Julie B. Alonso				Case number (if know)			
	First Name	Middle Name	Last Name				
Add	the dollar value of you	r entries in Column A on	this page. Write that number her	e:	\$77,000.00		
	is is the last page of your control is that number here:	our form, add the dollar va	lue totals from all pages.		\$77,000.00		
Part 2	2: List Others to Be	Notified for a Debt Th	at You Already Listed				
trying than o	to collect from you for	a debt you owe to somed the debts that you listed in	out your bankruptcy for a debt to one else, list the creditor in Part on Part 1, list the additional credit	, and then list the coll	lection agency here. Si	imilarly, if you have more	
	Name, Number, Street, Ditech Financial			On which line in Part 1 o	did you enter the credito	or? 2.1	
	Bankruptcy Dept P.O. Box 6154 Rapid City, SD 57			Last 4 digits of account	number		
	Name, Number, Street, GM Financial Lea			On which line in Part 1 o	did you enter the credito	or? _ 2.2 _	
	PO Box 183834 Arlington, TX 760	96-3834		Last 4 digits of account	number		
	Name, Number, Street, Manley Deas Koo			On which line in Part 1 o	did you enter the credito	or? 2.1	
	Atten: Richard J	. Sykora		Last 4 digits of account	number		

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property Official Form 106D

page 2 of 2

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P.O. Box 165028

Columbus, OH 43216-5028

Fill in	this informa	ation to identify your c	ase:					
Debtor	1	Julie B. Alonso	Middle Na	ame	Last Name			
Debtor (Spouse		First Name	Middle Na		Last Name			
		kruptcy Court for the:		N DISTRICT OF (
Case n	number			_			_	Check if this is an mended filing
Sche Be as co any exec	omplete and a	F: Creditors W accurate as possible. Use acts or unexpired leases t	Part 1 for cre	ditors with PRIOR	ITY claims and l	contracts on Schedule A/E	3: Property (Offici	
Schedul left. Atta	le D: Creditor sch the Conti nd case numb	rs Who Have Claims Secu	red by Proper e. If you have r	ty. If more space in information to r	s needed, copy	any creditors with partiall the Part you need, fill it ou do not file that Part. On th	it, number the en	tries in the boxes on the
		s have priority unsecured						
	No. Go to Pa		olanno agant	ot you.				
	Yes.	11 2.						
Part 2:		of Your NONPRIORITY	/ Unsecured	Claims				
		s have nonpriority unsec						_
	-	nothing to report in this pa	_		th vour other sch	adulas		
_	Yes.	Thouling to report in this pa	irt. Odbillit tills i	om to the court wi	ur your outer some	suules.		
uns	secured claim, n one creditor	list the creditor separately	for each claim.	For each claim list	ed, identify what t	b holds each claim. If a creatype of claim it is. Do not list three nonpriority unsecure	t claims already inc	cluded in Part 1. If more
								Total claim
4.1		atl. Property & Casu	alty Co	Last 4 digits of a	ccount number	8824		\$158.20
	1949 Eas	Creditor's Name at Sunshine		When was the de	bt incurred?	2016		-
	Number Stre	eld, MO 65899 eet City State Zlp Code ed the debt? Check one.		As of the date yo	u file, the claim i	is: Check all that apply		
	Debtor 1	only		☐ Contingent				
	Debtor 2	only		☐ Unliquidated				
	Debtor 1	and Debtor 2 only		☐ Disputed				
	☐ At least of	one of the debtors and ano	ther	Type of NONPRIO	ORITY unsecured	d claim:		
	☐ Check if	this claim is for a comm	unity	☐ Student loans				
	debt Is the claim	subject to offset?		Obligations aris	sing out of a sepa laims	aration agreement or divorce	e that you did not	
	■ No			Debts to pension	on or profit-sharin	ng plans, and other similar d	ebts	
	☐ Yes			Other. Specify	services			_

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 9

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52760

		\$1,322.00
As of the date you file, the claim i Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepa	s: Check all that apply	
☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa		
☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa	d claim:	
☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa	d claim:	
☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa	d claim:	
Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa	d claim:	
☐ Student loans☐ Obligations arising out of a sepa	d claim:	
☐ Obligations arising out of a sepa		
report as priority claims	ration agreement or divorce that you did not	
☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Other. Specify services		
Last 4 digits of account number	F127	\$2,600.00
When was the debt incurred?	5/2016	
As of the date you file the claim i	s: Chack all that annly	
As of the date you me, the claim	3. Oneok ali mat appiy	
☐ Contingent		
_		
_		
Type of NONPRIORITY unsecured	d claim:	
☐ Student loans		
	ration agreement or divorce that you did not	
☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Other. Specify judgment		
Last 4 digits of account number	9871	\$1,873.00
When was the debt incurred?	10/2016	
As of the date you file, the claim i	s: Check all that apply	
☐ Contingent		
☐ Unliquidated		
<u></u> '	d claim:	
_		
	ration agreement or divorce that you did not	
<u> </u>	g plans, and other similar debts	
•	- •	
	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim i Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify Judgment Last 4 digits of account number When was the debt incurred? As of the date you file, the claim i Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin	Last 4 digits of account number

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 9

Best Case Bankruptcy

Debtor	Julie B. Alonso		Case number (if know)	
4.5	Clinic Medical Services Co	Last 4 digits of account number	8391	\$36.00
	Nonpriority Creditor's Name P.O. Box 92237	When was the debt incurred?	2015	
	Cleveland, OH 44193 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	•		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify CC Star Image	aging	
	Department of Education/OSLA			
4.6	Serv	Last 4 digits of account number	1397	Unknown
	Nonpriority Creditor's Name 525 Central Park Dr., Ste 600 Oklahoma City, OK 73105	When was the debt incurred?	8/2016	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Student Lo	an - Deferred	
4.7	Discover Financial Services Nonpriority Creditor's Name	Last 4 digits of account number	2030	\$453.00
	PO Box 15316 Wilmington, DE 19850	When was the debt incurred?	7/2011	
	Number Street City State ZIp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plans, and other similar debte	
	■ No		y pians, and other similar debts	
	☐ Yes	Other. Specify credit card		

Schedule E/F: Creditors Who Have Unsecured Claims

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Merrick Bank Appropriate Creditor's Name 10708 S. Jordan GTWY, Ste 200 South Jordan, UT 94095 Runner Strane Chy Share Jay Code Who incurred the debt? Chock one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 o	Debto	Julie B. Alonso		Case number (if know)						
10705 S. Jordan GTWY, Ste 200 South Jordan, UT 8405 Number Street City State 2 Code As of the date you file, the claim is: Check all that apply Contingent Debtor 1 only Debtor 2 only Disputed Disputed Disputed Disputed Disputed Disputed Disputed Disputed Debtor 2 only Disputed Disputed Disputed Disputed Disputed Debtor 2 only Disputed Disputed Disputed Disputed Disputed Debtor 2 only Disputed Debtor 2 only Debtor 3 on Debtor 2 only Debtor 3 on Debtor 2 only Disputed Debtor 3 on Deb	4.8	Merrick Bank	Last 4 digits of account number	0802	\$1,252.00					
Number Street City State Zip Code Wo incurred the debt? Check one. Debtor 1 only		10705 S. Jordan GTWY, Ste 200	When was the debt incurred?	7/2016						
Debtor 1 only Contingent Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 3 and Debtor 2 only Debtor 3 and Deb		Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply						
Debtor 2 only Disputed Disp		Who incurred the debt? Check one.								
Debtor 1 and Debtor 2 only		Debtor 1 only	☐ Contingent							
At least one of the debtors and another Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim subject to offset? Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is check if t		Debtor 2 only	☐ Unliquidated	☐ Unliquidated						
Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Credit card		☐ Debtor 1 and Debtor 2 only	☐ Disputed							
Check it his claim is for a community debt Steel claim subject to offset? Contingent Con		\square At least one of the debtors and another	<u></u>	d claim:						
Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Personal System of Contingent Midland Funding LLC Asst 4 digits of account number 6650 \$701.00 Monpriority Creditor's Name 2365 Northslide Dr., Ste 300 San Diego, CA 92108 Number Street City State 2Dr Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 3 only Debtor 4 and Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Student loans Debts to pension or profit-sharing plans, and other similar debts Minute Clinic Diagnostic of Ohio Nonpriority Creditor's Name P.O. Box 14099 Belfast, ME 04915 Number Street City State 2Dr Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Creditor's Name P.O. Box 14099 Belfast, ME 04915 Number Street City State 2Dr Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 4 only Deb		•	Student loans							
Midland Funding LLC Nepoptority Creditor's Name 2365 Northside Dr., Ste 300 San Diego, CA 92108 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 and Steepen Street City State Sign Code Who Incurred the debtors and another Check if this claim is for a community debt Unliquidated Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 and Debtor 2 only Debtor 6 and Debtor 6 and Debtor 9 only Debtor 1 and Debtor 9 only Debtor 1 and Debtor 1 only Debtor 1 and Debtor 1 only Debtor 1 and Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 4 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 5 only Debto				ration agreement or divorce that you did not						
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■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Disputed □ Disputed □ Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts			As of the date you file, the claim	s: Check all that apply						
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		Who incurred the debt? Check one.	•							
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt ls the claim subject to offset? □ No □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		Debtor 1 only	☐ Contingent							
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		Debtor 2 only	☐ Unliquidated							
☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts		☐ Debtor 1 and Debtor 2 only	☐ Disputed							
debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims No ☐ Debts to pension or profit-sharing plans, and other similar debts		☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:						
Is the claim subject to offset? report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		☐ Check if this claim is for a community								
			Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not						
☐ Yes ☐ Other. Specify _ medical services		■ No	Debts to pension or profit-sharing	g plans, and other similar debts						
		☐ Yes	Other. Specify medical se	rvices						

Schedule E/F: Creditors Who Have Unsecured Claims

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Julie B. Alonso	Case number (if know)	
National Registered Agents, Inc.	Last 4 digits of account number 1800	\$228.0
Nonpriority Creditor's Name 4400 Easton Commons Way, Suite 125	When was the debt incurred? 2017	-
Columbus, OH 43219 Number Street City State Zlp Code	As of the date you file the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify services	-
NCP Finance	Last 4 digits of account number	\$2,000.0
Nonpriority Creditor's Name 205 Sugar Camp Circle Dayton, OH 45409-1970	When was the debt incurred?	-
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? ■ No	report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes	Other. Specify loan	
Pearl Law Offices, LLC Nonpriority Creditor's Name	Last 4 digits of account number	\$511.3
9393 Olde Eight Road Northfield, OH 44670	When was the debt incurred?	-
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Collecting for Sleep Disorders Center and Hospital at Southwoods	

Schedule E/F: Creditors Who Have Unsecured Claims

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Julie B. Alonso		Case number (if know)	
Portfolio Recovery	Last 4 digits of account number	9758	\$3,352.00
Nonpriority Creditor's Name 120 Corporate Blvd. East Norfolk, VA 23502	When was the debt incurred?	5/2017	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Collecting	for Synchrony Bank - judgment	
Portfolio Recovery	Last 4 digits of account number	4765	\$718.00
Nonpriority Creditor's Name 120 Corporate Blvd. Norfolk, VA 23502	When was the debt incurred?	2/2017	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Collecting	for Capital One Bank	
Portfolio Recovery	Last 4 digits of account number		\$699.00
Nonpriority Creditor's Name			************
120 Corporate Blvd. Norfolk, VA 23502	When was the debt incurred?	8/2015	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	· ·	for Synchrony Bank/JC Penney	

Schedule E/F: Creditors Who Have Unsecured Claims

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Receivables Performance	Last 4 digits of account number	4694	\$90.
Nonpriority Creditor's Name 20816 44th Ave W Lynnwood, WA 98036	When was the debt incurred?	4/2017	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin		
Yes	Other. Specify Collecting 1	for AT&T wireline	
Southwoods Anesthesia, LLC	Last 4 digits of account number	7437	\$40.
Nonpriority Creditor's Name 7630 Southern Blvd. Youngstown, OH 44512-5633	When was the debt incurred?	1/2016	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
Check if this claim is for a community debt	_	tration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify medical set	rvices	
Southwoods Anesthesia, LLC	Last 4 digits of account number	2054	\$47.
Nonpriority Creditor's Name 7630 Southern Blvd.	When was the debt incurred?	2016	
Youngstown, OH 44512-5633 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify medical ser	rvices	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debt	or 1 Julie B. Alonso		Case number (if know)	
4.2 0	T&T Lawn Service	Last 4 digits of account numb	er	\$375.00
O .	Nonpriority Creditor's Name 3897 Lanterman Road	When was the debt incurred?	5/2017	· · · · · · · · · · · · · · · · · · ·
Youngstown, OH 44515 Number Street City State Zlp Code Who incurred the debt? Check one.		As of the date you file, the clai	m is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecu	ıred claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sereport as priority claims	eparation agreement or divorce that you did not	
	■ No	Debts to pension or profit-sha	aring plans, and other similar debts	
	Yes	Other. Specify service		
Part	3: List Others to Be Notified About a De	ebt That You Already Listed		
is t hav	e this page only if you have others to be notified rying to collect from you for a debt you owe to s re more than one creditor for any of the debts th ified for any debts in Parts 1 or 2, do not fill out	someone else, list the original credito at you listed in Parts 1 or 2, list the a	r in Parts 1 or 2, then list the collection agency	here. Similarly, if you
	e and Address	On which entry in Part 1 or Part 2 did y	_	
	ssroads Sleep Disorders Boardman Poland Rd.	Line 4.13 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claim	
Ste			Part 2: Creditors with Nonpriority Unsecured C	Claims
You	ngstown, OH 44512	Last 4 digits of account number		
Name	e and Address	On which entry in Part 1 or Part 2 did y	you list the original creditor?	
Firs	t Federal Credit Control	Line <u>4.13</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claim	าร
	0 Chagrin Blvd.		■ Part 2: Creditors with Nonpriority Unsecured C	Claims
Ste	205 chwood, OH 44122-5630			
Беа	Cliwood, Oli 44122-3030	Last 4 digits of account number		
Name	e and Address	On which entry in Part 1 or Part 2 did y	you list the original creditor?	
	uteClinic of Ohio	Line 4.10 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claim	ns
	. Box 17221		■ Part 2: Creditors with Nonpriority Unsecured C	claims
wiir	nington, DE 19850	Last 4 digits of account number		
	e and Address	On which entry in Part 1 or Part 2 did y	you list the original creditor?	
	rmeta Law Group, PLLC	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claim	าร
_	. Box 5016 hester, MI 48308-5016		Part 2: Creditors with Nonpriority Unsecured C	Claims
NOC	nester, wii 40300-3010	Last 4 digits of account number		
	e and Address	On which entry in Part 1 or Part 2 did y		
Surgical Hospital at Southwoods 7630 Southwoods Blvd. Youngstown, OH 44512		Line 4.13 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claim	
			Part 2: Creditors with Nonpriority Unsecured C	Claims
	3-	Last 4 digits of account number		
	e and Address	On which entry in Part 1 or Part 2 did y		
	nsWorld Systems, Inc.	Line 4.10 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claim	
	Virginia Dr., Suite 514 : Washington, PA 19034		Part 2: Creditors with Nonpriority Unsecured C	claims
. 011	. Tradinington, I A 19004	Last 4 digits of account number		
	and Address	On which code in Dord 4 on D. 10.11	valuation ariginal argadity -0	

Name and Address

On which entry in Part 1 or Part 2 did you
Vengroff Williams, Inc.

Line 4.1 of (Check one):

Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 9

Sarasota, FL 34230

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims rom Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ ———	0.00
				*	
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
om Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	16,603.54
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	16,603.54

Fill in this information to identify your case:						
Debtor 1	Julie B. Alonso					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF OHIO			
Case number						Check if this is an
						amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code State what the contract or lease is for

2.1 GM Financial Leasing PO Box 181145 Arlington, TX 76096-1145 2015 GMC Terrain

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Best Case Bankruptcy

Fill in this	information to identify your	case:			
Debtor 1	Julie B. Alonso				
D 1 ()	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRIC	T OF OHIO		
Case num (if known)	ber				☐ Check if this is an amended filing
Officia	l Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
fill it out, a your name		boxes on the left. Attac . Answer every question	h the Additional Page to n.	o this page. On the top	eeded, copy the Additional Page, o of any Additional Pages, write
_	,	, ou are iming a joint dade	, 40 1.01 1.01 0.11.10.1 0.0000	ao a oo ao ao ao ao a	
■ No □ Yes	3				
Arizon	hin the last 8 years, have you ha, California, Idaho, Louisiana, Go to line 3. S. Did your spouse, former spouse.	Nevada, New Mexico, P	uerto Rico, Texas, Washi		v states and territories include
in line Form	e 2 again as a codebtor only i	f that person is a guara	ntor or cosigner. Make s	sure you have listed th	g with you. List the person shown the creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
_	Name			☐ Schedule D, line ☐ Schedule E/F, li ☐ Schedule G, line	ne
	Number Street City	State	ZIP Code		
3.2	Name			_ ☐ Schedule D, line ☐ Schedule E/F, li	ne
	Number Street City	State	ZIP Code	-	

Schedule H: Your Codebtors

	in this information to identify your c								
Deb	otor 1 Julie B. Alor	nso			-				
	otor 2 use, if filing)				_				
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF OHIO		_				
	se number		-				ed filing ent showing	g postpetition	
Of	fficial Form 106l				_			mowing date	•
	chedule I: Your Inc	ome			N	им / DD/ Y	Y Y Y		12/15
spoi atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	ır spouse is not filing wi	ith you, do not includ	e inform	ation abou	t your spo	ouse. If mo	re space is	needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-fil	ling spouse	
	If you have more than one job,	Employment status*	■ Employed			☐ Emple	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not e	mployed		
	employers.	Occupation	Adult Program S	pecialis	st				
	Include part-time, seasonal, or self-employed work.	Employer's name	Mahoning Count Develop Disabil	y Board	d of				
	Occupation may include student or homemaker, if it applies.	Employer's address	4791 Woodridge Youngstown, OH						
		How long employed the		chment f	for Addition	nal Emplo	yment Info	ormation	
Par	Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to rep	oort for a	ny line, write	e \$0 in the	space. Inc	lude your no	n-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all en	nployers for	that perso	on on the lir	nes below. If	you need
					For De	btor 1		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$2	2,132.33	\$	N/A	-
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	-
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$ 2.1	32.33	\$	N/A	

	8g. Pension or retirement income	8g. \$	0.00 \$	N/A
	8h. Other monthly income. Specify: Turning Point Residential	8h.+ \$	373.00 + \$	N/A
	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$	373.00	N/A
0.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 1,84	6.75 + \$	N/A = \$ 1,846
1.	State all other regular contributions to the expenses that you list in <i>Sche</i> Include contributions from an unmarried partner, members of your household, other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are	your dependents, your	,	chedule J

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies

12.	\$ 1,846.75
	 mbined

0.00

11. +\$

13. Do you expect an increase or decrease within the year after you file this form?

9

Specify:

No.	
Yes. Explain:	

Official Form 106I Schedule I: Your Income page 2

Official Form B 6I Attachment for Additional Employment Information

Debtor		
Occupation		
Name of Employer	Turning Point Residential Inc	
How long employed		
Address of Employer	5512 Youngstown-Poland Rd.	
	Youngstown, OH 44514	

Official Form 106I Schedule I: Your Income page 3

Fill ir	n this informat	tion to identify yo	our case:						
Debte	or 1	Julie B. Alon	iso			_	neck if t		
Debte	or 2							amended filing Ipplement show	ving postpetition chapter
(Spo	use, if filing)								the following date:
United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO						MM / DD / YYYY			
Case (If kn	e number own)								
Of	ficial Fo	rm 106J							
Sc	hedule	J: Your I	Expen	ises					12/15
Be a info num	is complete a rmation. If m ber (if know	and accurate as ore space is ne n). Answer ever	possible. eded, atta y question	If two married people ar ch another sheet to this					
Part 1.	1: Descr	ibe Your House	hold						
	■ No. Go to	line 2.	in a senar:	ate household?					
	□ No	0		al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of D	ebtor 2		
2.	Do you have	e dependents?	■ No						
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto			Dependent's age	Does dependent live with you?
	Do not state	the							□ No
	dependents	names.							☐ Yes
									□ No
					-				☐ Yes
									□ No
									Yes
									□ No
2	Da		_						☐ Yes
3.	expenses of	enses include f people other tl d your depende	han $_{m \Box}$	No Yes					
Esti	mate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp					
the v		n assistance and		government assistance it luded it on <i>Schedule I:</i> Y				Your expe	enses
4.		or home owners and any rent for the		ses for your residence. In r lot.	nclude first mortgage	4.	\$_		592.00
	If not includ	led in line 4:							
	4a. Real e	state taxes				4a.	\$		0.00
	4b. Proper	rty, homeowner's	s, or renter	's insurance		4b.	\$		0.00
	4c. Home	maintenance, re	pair, and ι	ıpkeep expenses		4c.	\$		25.00
		owner's associat				4d.	\$		0.00
5	Additional	nortanao navmo	onte for ve	ur residence, such as ha	ma aquity lagge	5	Φ.		0.00

	Julie B. Alonso	Case num	ber (if known)	
Utiliti	es:			
6a.	Electricity, heat, natural gas	6a.	\$	90.00
6b.	Water, sewer, garbage collection	6b.	\$	70.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	150.00
6d.	Other. Specify:	6d.	·	0.00
	·		·	
	and housekeeping supplies	7.	\$	200.00
	care and children's education costs	8.	\$	0.00
	ing, laundry, and dry cleaning	9.	\$	20.00
	onal care products and services	10.	\$	20.00
. Medi	cal and dental expenses	11.	\$	20.00
	sportation. Include gas, maintenance, bus or train fare. ot include car payments.	12.	\$	100.00
	tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	10.00
	itable contributions and religious donations	14.	·	0.00
. Insur	•		<u> </u>	0.00
	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.		0.00
	Vehicle insurance	15b.	\$	
			· -	85.00
	Other insurance. Specify:	15d.	\$	0.00
Speci		16.	\$	0.00
	Ilment or lease payments:			
17a.	Car payments for Vehicle 1	17a.	\$	250.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as		· -	
	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	r payments you make to support others who do not live with you.		\$	0.00
Speci		19.		
. Other	r real property expenses not included in lines 4 or 5 of this form or on Sche	dule I: Yo	our Income.	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	\$	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.	· -	
	Homeowner's association or condominium dues		·	0.00
		20e.	·	0.00
. Other	r: Specify:	21.	+\$	0.00
Calci	ılate your monthly expenses			
	Add lines 4 through 21.		\$	1 632 00
	•			1,632.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	Add line 22a and 22b. The result is your monthly expenses.		\$	1,632.00
	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.		1,846.75
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	1,632.00
23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	214.75
For ex	bu expect an increase or decrease in your expenses within the year after your manager and a you expect to finish paying for your car loan within the year or do you expect your cation to the terms of your mortgage?			or decrease because of a
■ No)			

	mation to identify your	case.		
Debtor 1	Julie B. Alonso	ouse.		
	First Name	Middle Name	Last Name	
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF OHIO	
Case number				
f known)				☐ Check if this is an amended filing
two married p	eople are filing together	r, both are equally resp	onsible for supplying correct in	formation.
btaining mone		n connection with a bar		ng a false statement, concealing property, or s up to \$250,000, or imprisonment for up to 20
btaining mone ears, or both. 1	y or property by fraud in	n connection with a bar		ng a false statement, concealing property, or
otaining mone ears, or both. 1	y or property by fraud ii 8 U.S.C. §§ 152, 1341, 1 in Below	n connection with a bar 519, and 3571.		ng a false statement, concealing property, or s up to \$250,000, or imprisonment for up to 20
otaining mone ears, or both. 1	y or property by fraud ii 8 U.S.C. §§ 152, 1341, 1 in Below	n connection with a bar 519, and 3571.	nkruptcy case can result in fines	ng a false statement, concealing property, or s up to \$250,000, or imprisonment for up to 20
btaining mone ears, or both. 1 Sig Did you pa	y or property by fraud ii 8 U.S.C. §§ 152, 1341, 1 in Below	n connection with a bar 519, and 3571.	nkruptcy case can result in fines	ng a false statement, concealing property, or s up to \$250,000, or imprisonment for up to 20 ptcy forms? Attach Bankruptcy Petition Preparer's Notice,
btaining mone, ears, or both. 1 Sig Did you pa No Yes.	y or property by fraud in I8 U.S.C. §§ 152, 1341, 1 in Below ay or agree to pay some	n connection with a bar 519, and 3571.	nkruptcy case can result in fines	ng a false statement, concealing property, or s up to \$250,000, or imprisonment for up to 20 ptcy forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Did you pa No Yes. Under penathat they ar	y or property by fraud in 18 U.S.C. §§ 152, 1341, 1 in Below Any or agree to pay some Name of person Alty of perjury, I declare the true and correct.	n connection with a bar 519, and 3571.	nkruptcy case can result in fines prince to help you fill out bankrup mmary and schedules filed with	ng a false statement, concealing property, or s up to \$250,000, or imprisonment for up to 20 ptcy forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
btaining mone ears, or both. 1 Sig Did you pa No Yes. I Under pena that they ar X /s/ Julie E	y or property by fraud in I8 U.S.C. §§ 152, 1341, 1 in Below ay or agree to pay some Name of person alty of perjury, I declare	n connection with a bar 519, and 3571.	nkruptcy case can result in fines	ng a false statement, concealing property, or s up to \$250,000, or imprisonment for up to 20 ptcy forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) this declaration and

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill in th	is information to ident	ify your case:					
Debtor 1	Julie B. Al						
200101 1	First Name	Middle N	Name	Last Name			
Debtor 2 (Spouse if, t		Middle N	Name	Last Name			
United S	tates Bankruptcy Court	for the: NORTHER	N DISTRICT	OF OHIO			
Case nur	mber		_				
(if known)					_	Check if this is an amended filing	
Officia	al Form 107						
		cial Affairs fo	or Indivi	duals Filing for E	Bankruptcy	4/16	
informati		eeded, attach a sepa			e equally responsible for sup ny additional pages, write yo		
Part 1:	Give Details About Y	our Marital Status ar	nd Where Yo	u Lived Before			
1. Wha	t is your current marit	al status?					
□	Married Not married						
2. Duri	ng the last 3 years, ha	ve you lived anywhe	re other than	where you live now?			
■□	No Yes. List all of the place	es you lived in the last	3 years. Do r	not include where you live no	w.		
Deb	otor 1 Prior Address:		ates Debtor 1 red there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there	
					nity property state or territor Rico, Texas, Washington and \		
	No						
	Yes. Make sure you fill	out Schedule H: Your	Codebtors (C	Official Form 106H).			
Part 2	Explain the Sources	of Your Income					
Fill ir	the total amount of inc	ome you received fron	n all jobs and	ng a business during this y all businesses, including par re together, list it only once u		ndar years?	
	No						
	Yes. Fill in the details.						
		Debtor 1			Debtor 2		
		Sources of in Check all that		Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
	nuary 1 of current yea you filed for bankrupt			\$17,684.00	☐ Wages, commissions, bonuses, tips		
		☐ Operating	a business		☐ Operating a business		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Best Case Bankruptcy

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Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

☐ Suppliers or vendors

□ Other

ebtor 1	Julie	B. Alonso		Cas	se number (if known)	
<i>Insid</i> of what is a second of the second of	ders includ hich you a	before you filed for bankrupt le your relatives; any general pare an officer, director, person in u operate as a sole proprietor.	artners; relatives of any gent control, or owner of 20%	neral partners; partners or more of their voting	erships of which yo g securities; and a	ou are a general partner; corporation ny managing agent, including one
	No Yes. List	all payments to an insider.				
Insi	ider's Na	me and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
insid	der? ude payme	ents on debts guaranteed or co		yments or transfer a	any property on a	ccount of a debt that benefited a
□ Insi		all payments to an insider me and Address	Dates of payment	Total amount	Amount you	Reason for this payment
			, ,	paid	still owe	Include creditor's name
List	all such m lifications,	before you filed for bankrupt atters, including personal injury and contract disputes.				
List a mod	all such m lifications,	atters, including personal injury				
List: mod	all such m lifications, No Yes. Fill se title se numbe	natters, including personal injury and contract disputes. In the details.	r cases, small claims actio	ns, divorces, collectio	n suits, paternity a	actions, support or custody
Cas Cas Ditt Alc 201	all such m difications, No Yes. Fill se title se numbe ech Fina onso, et 17 CV 15	eatters, including personal injury and contract disputes. In the details. In the details.	Nature of the case	Court or agency Mahoning Cour Pleas 120 Market St.	n suits, paternity a nty Common DH 44503	Status of the case Pending On appeal
Cas Cas Ditt Alc 201	all such milifications, No Yes. Fill se title se number ech Fina onso, et 17 CV 15 rtfolio R Alonso CVF 262	eatters, including personal injury and contract disputes. In the details. In the details.	Nature of the case Foreclosure	Court or agency Mahoning Cour Pleas 120 Market St. Youngstown, C	n suits, paternity a nty Common OH 44503 nty Court	Status of the case Pending On appeal Concluded Pending On appeal

No. Go to line 11.

☐ Yes. Fill in the information below.

Creditor Name and Address

Describe the Property

Explain what happened

Date

Value of the property

Explain what happened

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

11.	Within 90 days before you filed for bank accounts or refuse to make a payment be No		, did any creditor, including a bank or financial ins e you owed a debt?	stitution, set off any	amounts from your		
	☐ Yes. Fill in the details.						
	Creditor Name and Address	De	escribe the action the creditor took	Date action was taken	Amount		
12.	court-appointed receiver, a custodian, o		vas any of your property in the possession of an a ner official?	assignee for the ben	efit of creditors, a		
	■ No □ Yes						
Par	t 5: List Certain Gifts and Contribution	ıs					
13.	Within 2 years before you filed for banks ■ No □ Yes. Fill in the details for each gift.	uptcy,	did you give any gifts with a total value of more to	han \$600 per person	?		
	Gifts with a total value of more than \$60 per person	00	Describe the gifts	Dates you gave the gifts	Value		
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No ■ Yes. Fill in the details for each gift or contribution.						
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	total	Describe what you contributed	Dates you contributed	Value		
Par	t 6: List Certain Losses	•					
15.	Within 1 year before you filed for bankru or gambling?	ptcy o	r since you filed for bankruptcy, did you lose any	hing because of the	ft, fire, other disaster,		
	■ No☐ Yes. Fill in the details.						
	Describe the property you lost and how the loss occurred	Includ	ribe any insurance coverage for the loss le the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost		
Par	t 7: List Certain Payments or Transfer	S					
16.	consulted about seeking bankruptcy or	prepar	lid you or anyone else acting on your behalf pay or ing a bankruptcy petition? rs, or credit counseling agencies for services required		erty to anyone you		
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	′ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment		

Case number (if known)

Official Form 107

Debtor 1 Julie B. Alonso

Statement of Financial Affairs for Individuals Filing for Bankruptcy

 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone when promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No			ty to anyone who					
	Yes. Fill in the details.							
	Person Who Was Paid Address	Description and variansferred	alue of any pro	perty	Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread No	usiness or financial affa ade as security (such as	airs? the granting of a					
	☐ Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and very property transfer			any property or s received or debts change	Date transfer was made		
	Person's relationship to you							
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro		y property to a	self-settled tr	ust or similar device o	of which you are a		
	Yes. Fill in the details.							
	Name of trust	Description and	alue of the prop	perty transfer	red	Date Transfer was made		
Par	List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and Sto	orage Units				
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.							
	☐ Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	cle me	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer		
21.	. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
	No							
	Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?		
22.	Have you stored property in a storage unit of	or place other than you	home within 1	year before y	ou filed for bankruptc	y?		
	No							
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Julie B. Alonso Case number (if known)

Pai	t 9: Identify Property You Hold or Control for	Someone Else				
23.	Do you hold or control any property that someofor someone.	one else owns? Include any prop	erty y	ou borrowed from, are storing for	, or hold in trust	
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	escribe the property	Value	
Par	t 10: Give Details About Environmental Informa	,				
	the purpose of Part 10, the following definitions					
_						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul	ir, land, soil, surface water, grou	_	•		
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		al law,	, whether you now own, operate, o	or utilize it or used	
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s	mental law defines as a hazardo	us wa	ste, hazardous substance, toxic s	substance,	
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wh	en the	ey occurred.		
24.	Has any governmental unit notified you that you	u may be liable or potentially liab	ole und	der or in violation of an environme	ental law?	
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State : ZIP Code)	and	Environmental law, if you know it	Date of notice	
25.	Have you notified any governmental unit of any	release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State & ZIP Code)	and	Environmental law, if you know it	Date of notice	
26.	Have you been a party in any judicial or adminis	strative proceeding under any en	viron	mental law? Include settlements a	and orders.	
	■ No					
	Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case	
Pai	t 11: Give Details About Your Business or Con	·				
				f the fellowing connections to an	, husinasa?	
27.	27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
	☐ A member of a limited liability company		•	•		
	☐ A partner in a partnership	(LLC) or infinted hability partners	silip (i	LLF)		
	☐ An officer, director, or managing execut	tive of a cornoration				
	☐ An owner of at least 5% of the voting or	-	n			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Julie B. Alonso			se number (if known)
	No None of the above and the Code	D-140	
	No. None of the above applies. Go to		
		Il in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.
	(classes, only, class and an occupy	Name of accountant of bookkeeper	Dates business existed
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	otcy, did you give a financial statement to ar	nyone about your business? Include all financial
	No		
	☐ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	12: Sign Below		
are t with 18 U	rue and correct. I understand that making a		declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.
	ie B. Alonso	Signature of Debtor 2	
Sig	nature of Debtor 1	-	
Dat	July 20, 2017	Date	
Did : ■ N □ Y	0	ent of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?
■ N	0	ot an attorney to help you fill out bankruptcy	
ПΥ	es. Name of Person Attach the Bankro	uptcy Petition Preparer's Notice, Declaration, a	and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Fill in this information to identify your case:					
Debtor 1	Julie B. Alonso				
Debtor 2 (Spouse, if filing)					
United States Bankruptcy Court for the: Northern District of Ohio					
Case number (if known)					

Che	Check as directed in lines 17 and 21:					
	According to the calculations required by this Statement:					
•		1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).				
ַ		2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).				
i		3. The commitment period is 3 years.				
		4. The commitment period is 5 years.				

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Pa	rt	1: Calculate Your Average Monthly Income							
1		What is your marital and filing status? Check one of	only.						
		■ Not married. Fill out Column A, lines 2-11.							
		☐ Married. Fill out both Columns A and B, lines 2-11							
	10 ⁻ the	I in the average monthly income that you received from a 1(10A). For example, if you are filing on September 15, the 6-6 months, add the income for all 6 months and divide the tobuses own the same rental property, put the income from that	month peal by 6. F	eriod would ill in the re	l be March 1 throusult. Do not includ	ugh August 31 de any income	. If the ame amount m	ount of your monthly incom nore than once. For examp	ne varied during le, if both
						Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
2		Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and c	ommissio	ons (before all	\$ 2,2	266.13	\$	
3		Alimony and maintenance payments. Do not includ Column B is filled in.	e paym	ents from	a spouse if	\$	0.00	\$	
4		All amounts from any source which are regularly pof you or your dependents, including child support from an unmarried partner, members of your househo and roommates. Include regular contributions from a stilled in. Do not include payments you listed on line 3.	rt. Includ	de regulai depende	contributions nts, parents,	\$	0.00	\$	
5		Net income from operating a business, profession, or farm	Debto	r 1					
		Gross receipts (before all deductions)	\$_	0.00					
		Ordinary and necessary operating expenses	- \$ _	0.00					
		Net monthly income from a business, profession, or fa	arm \$_	0.00	Copy here ->	\$	0.00	\$	
6		Net income from rental and other real property	Debto						
		Gross receipts (before all deductions)	\$_	0.00					
		Ordinary and necessary operating expenses	- \$ _	0.00					
		Net monthly income from rental or other real property	•	0.00	Copy here ->	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 1

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Best Case Bankruptcy

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

 \$
 0.00
 \$

 \$
 0.00
 \$

 Total amounts from separate pages, if any.
 + \$
 0.00
 \$

11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

+	Φ			
\$2	,266.13	+ \$	_ = \$_	2,266.13
			To mo	tal average onthly income

Part 2: Determine How to Measure Your Deductions from Income

- 12. Copy your total average monthly income from line 11. \$ 2,266.13
- 13. Calculate the marital adjustment. Check one:
 - You are not married. Fill in 0 below.
 - ☐ You are married and your spouse is filing with you. Fill in 0 below.
 - ☐ You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

, , , , , , , , , , , , , , , , , , , ,	\$
	+\$
Total	\$ 0.00

14. Your current monthly income. Subtract line 13 from line 12.

\$ 2,266.13

Copy here=>

15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here=>

Multiply line 15a by 12 (the number of months in a year).

\$____2,266.13

0.00

15b. The result is your current monthly income for the year for this part of the form.

\$ 27,193.56

x 12

ebtor 1	Juli	ie B. Alonso		Case number (if known)		
16. Cal o	culate	e the median family income that applies to	you. Follow these steps	:		
16a	. Fill i	n the state in which you live.	ОН			
16b	. Fill i	n the number of people in your household.	1			
16c	. Fill ii	n the median family income for your state and	size of household.		\$	46,242.00
7 Haw	instr	ind a list of applicable median income amount ructions for this form. This list may also be available lines as a manage.			Ψ_	
		the lines compare?				
17a.	. •	Line 15b is less than or equal to line 16c. 11 U.S.C. § 1325(b)(3). Go to Part 3. Do				
17b.	. C	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14:	ulation of Your Dispos	heck box 2, <i>Disposable income is c</i> able Income (Official Form 122C-	determined u 2). On line 3	ander 11 U.S.C. §
art 3:	Ca	alculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)			
3. Cop	у уо	ur total average monthly income from line	11.		\$	2,266.1
cont spot	tend t use's	he marital adjustment if it applies. If you are hat calculating the commitment period under income, copy the amount from line 13.	11 U.S.C. § 1325(b)(4) a			
19a.	. If the	e marital adjustment does not apply, fill in 0 or	n line 19a.		- \$	0.0
19b	. Sub	tract line 19a from line 18.			\$_	2,266.13
0. Cal	culate	e your current monthly income for the year	. Follow these steps:			2 255 42
20a	. Cop	y line 19b			\$_	2,266.13
	Mult	iply by 12 (the number of months in a year).				x 12
20b.	. The	result is your current monthly income for the	year for this part of the fo	orm	\$_	27,193.56
20c.	. Сор	y the median family income for your state and	size of household from	line 16c	\$_	46,242.00
21.	How	v do the lines compare?				
		Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4.	ise ordered by the court	on the top of page 1 of this form, c	heck box 3,	The commitmen
		Line 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4.	nless otherwise ordered	by the court, on the top of page 1 o	of this form, o	check box 4, The
art 4:	Si	gn Below				
•		g here, under penalty of perjury I declare that	the information on this s	tatement and in any attachments is	true and co	rrect.
X /s/		e B. Alonso 3. Alonso				

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

If you checked 17a, do NOT fill out or file Form 122C-2.

Date July 20, 2017 MM / DD / YYYY

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 01/01/2017 to 06/30/2017.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: MCBDD

Income by Month:

Debtor 1

6 Months Ago:	01/2017	\$1,874.20
5 Months Ago:	02/2017	\$1,874.20
4 Months Ago:	03/2017	\$2,952.45
3 Months Ago:	04/2017	\$1,136.09
2 Months Ago:	05/2017	\$1,914.35
Last Month:	06/2017	\$1,749.53
	Average per month:	\$1,916.80

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Turning Point Residential

Income by Month:

6 Months Ago:	01/2017	\$215.00
5 Months Ago:	02/2017	\$225.00
4 Months Ago:	03/2017	\$326.00
3 Months Ago:	04/2017	\$715.00
2 Months Ago:	05/2017	\$350.00
Last Month:	06/2017	\$265.00
	Average per month:	\$349.33

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	¢310	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcv_fo

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Northern District of Ohio

compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services reported be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$ 3,500.00 Prior to the filing of this statement I have received \$ 0.00 Balance Due \$ 3,500.00 The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankrupt. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of motions pursuant to 15 522(f)(2)(A) for avoidance of liens on household goods.	
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services reported to be paid to me, for services reported to be paid to me, for services reported to be paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services reported to be paid to me, for services reported to be paid to me was: For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of paid to pay of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankry b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; (I) (Other provisions as needed) Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of motions pursuant to 17 522(f)(2)(A) for avoidance of liens on household goods.	
compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services reported to be paid to me, for services reported to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due \$ 3,500.00 Balance Due \$ 3,500.00 The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of population of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankr b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; (I Other provisions as needed) Negotiations with secured creditors to reduce to market value; exemption planning; preparation and fire reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 15 522(f)(2)(A) for avoidance of liens on household goods.	
Prior to the filing of this statement I have received \$ 0.00 Balance Due \$ 3,500.00 2. The source of the compensation paid to me was: Debtor Other (specify): 3. The source of compensation to be paid to me is: Debtor Other (specify): 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of place of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankry be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of motions pursuant to 1522(f)(2)(A) for avoidance of liens on household goods. 6. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay	
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	tay actions or
CERTIFICATION	
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the dethis bankruptcy proceeding.	e debtor(s) in
July 20, 2017 /s/ Diane Sekerak Stevens	
Date Diane Sekerak Stevens 0064775	
Signature of Attorney Diane Sekerak Stevens	l
Attorney at Law	!
150 E. Market St., Suite 300	
Warren, OH 44481 330-391-7484 Fax: 330-391-7568	,
DStevens@dianestevenslaw.com	i i
Name of law firm	

United States Bankruptcy Court Northern District of Ohio

In re	Julie B. Alonso		Case No.	
		Debtor(s)	Chapter	13
	VE	RIFICATION OF CREDITOR M	IATRIX	
The ab	ove-named Debtor hereby verific	es that the attached list of creditors is true and con	rrect to the best	of his/her knowledge.
Date:	July 20, 2017	/s/ Julie B. Alonso		
		Julie B. Alonso		
		Signature of Debtor		

Amer. Natl. Property & Casualty Co 1949 East Sunshine Springfield, MO 65899

Armstrong Cable 437 North Main Street Butler, PA 16001

Barclays Bank Delaware c/o Kirschenbaum, Phillips & Levy 4645 Executive Drive Columbus, OH 43220

Capital One Bank (USA), N.A. 5100 Peachtree Industrial Blvd. Norcross, GA 30071

Clinic Medical Services Co P.O. Box 92237 Cleveland, OH 44193

Crossroads Sleep Disorders 721 Boardman Poland Rd. Ste 204 Youngstown, OH 44512

Department of Education/OSLA Serv 525 Central Park Dr., Ste 600 Oklahoma City, OK 73105

Discover Financial Services PO Box 15316 Wilmington, DE 19850

Ditech Financial LLC 3000 Bayport Drive Suite 880 Tampa, FL 33607

Ditech Financial LLC Bankruptcy Dept. P.O. Box 6154 Rapid City, SD 57709-6154 First Federal Credit Control 2470 Chagrin Blvd. Ste 205 Beachwood, OH 44122-5630

GM Financial Leasing PO Box 181145 Arlington, TX 76096-1145

GM Financial Leasing PO Box 183834 Arlington, TX 76096-3834

Manley Deas Kochalski LLC Atten: Richard J. Sykora P.O. Box 165028 Columbus, OH 43216-5028

Merrick Bank 10705 S. Jordan GTWY, Ste 200 South Jordan, UT 84095

Midland Funding LLC 2365 Northside Dr., Ste 300 San Diego, CA 92108

MinuteClinic Diagnostic of Ohio P.O. Box 14099 Belfast, ME 04915

MinuteClinic of Ohio P.O. Box 17221 Wilmington, DE 19850

National Registered Agents, Inc. 4400 Easton Commons Way, Suite 125 Columbus, OH 43219

NCP Finance 205 Sugar Camp Circle Dayton, OH 45409-1970

Pearl Law Offices, LLC 9393 Olde Eight Road Northfield, OH 44670

Portfolio Recovery 120 Corporate Blvd. East Norfolk, VA 23502

Portfolio Recovery 120 Corporate Blvd. Norfolk, VA 23502

Receivables Performance 20816 44th Ave W Lynnwood, WA 98036

Shermeta Law Group, PLLC P.O. Box 5016 Rochester, MI 48308-5016

Southwoods Anesthesia, LLC 7630 Southern Blvd. Youngstown, OH 44512-5633

Surgical Hospital at Southwoods 7630 Southwoods Blvd. Youngstown, OH 44512

T&T Lawn Service 3897 Lanterman Road Youngstown, OH 44515

TransWorld Systems, Inc. 500 Virginia Dr., Suite 514 Fort Washington, PA 19034

Vengroff Williams, Inc. P.O. Box 4155 Sarasota, FL 34230